
INDIANA Epidemiology NEWSLETTER



Epidemiology Resource Center
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Preparing for the Next Pandemic

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The recent outbreak of avian H5N1 influenza in Southeast Asia is of major concern to public health officials. As of this writing, the virus has killed 50 people, sickened many others, and resulted in the culling of thousands of chickens. Although the virus has not yet demonstrated the ability to easily transmit from person to person, further viral mutations may allow that ability at any time. The world's population would not have immunity to this virus, resulting in the potential for a pandemic (worldwide epidemic). Thus, the development of influenza pandemic plans at national, state, and local levels is currently a top public health priority.

A pandemic differs from other public health events in that a pandemic will be widespread, will likely last several months, and will deplete resources at all levels. Therefore, local preparedness and response will be especially critical.

The Indiana State Department of Health (ISDH) is addressing this issue through the Pandemic Influenza Working Group. Chaired by Charlene Graves, M.D., Medical Director for Immunization and Injury Prevention, the working group has met regularly since March to draft a state-level plan for influenza pandemic preparation and response. Dr. Graves states, "The threat of a pandemic due to avian influenza is a major current public health concern due to its expected overwhelming impact on all aspects of society. Imagine our world if 15 to 35 percent of any population is infected and very ill within less than a year. There will be massive workforce disruptions. Schools will be closed, all public events canceled as part of disease containment. Vaccine is not likely to be available in the early stages of a pandemic. There is a strong sense of urgency in accomplishing plans to address the numerous issues involved in an influenza pandemic."

The working group has identified six areas associated with this effort: Planning/Logistics, Surveillance, Strategies/Policies, Mass Care/Prophylaxis/Data, Communications, and Training. Subcommittees within the working group have developed more detailed planning within each of these six areas. The ISDH pandemic plan mainly addresses preparedness and response issues at the state level; however, many action items would entail a similar response at the local level. Action items are organized according to the six pandemic phases recently described within the World Health Organization (WHO) Global Influenza Preparedness Plan¹:

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Interpandemic Period

Phase 1: No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection or disease is considered to be low.

Phase 2: No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza virus subtype poses a substantial risk of human disease.

Pandemic Alert Period

Phase 3: Human infection(s) with a new subtype but no human-to-human spread or, at most, rare instances of spread to a close contact.

Phase 4: Small cluster(s) with limited human-to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans.

Phase 5: Larger cluster(s) but human-to-human spread still localized, suggesting that the virus is becoming increasingly better adapted to humans but may not be fully transmissible (substantial pandemic risk).

Pandemic Period

Phase 6: Pandemic: increased and sustained transmission in general population.

Representatives from the ISDH working group will take the final draft of the plan to the regional pandemic influenza planning meeting in Chicago on April 26-27 for feedback and recommendations. Based on information gained at the meeting, the plan will be revised for further review.

The training subcommittee is developing strategies to educate health care providers, public health professionals, and the general public regarding pandemic planning and response. Regional trainings will be held throughout Indiana by December 31, 2005.

References:

¹www.who.int/csr/resources/publications/influenza/en/WHO_CDS_CSR_GIP_2005_5.pdf

More information regarding influenza pandemics and pandemic planning and response will be available in the June issue of the <i>Indiana Epidemiology Newsletter</i> .

Investigation Forms Available On-line

James Howell, DVM, MPH
Veterinary Epidemiologist

The Indiana State Department of Health (ISDH) Epidemiology Resource Center (ERC) has updated several reporting forms and posted them to the ISDH Web site for timely investigation and reporting. These forms include 27 reportable communicable disease case investigation forms, the Animal Bite Report form, and the Application and Claim for Biologics form.

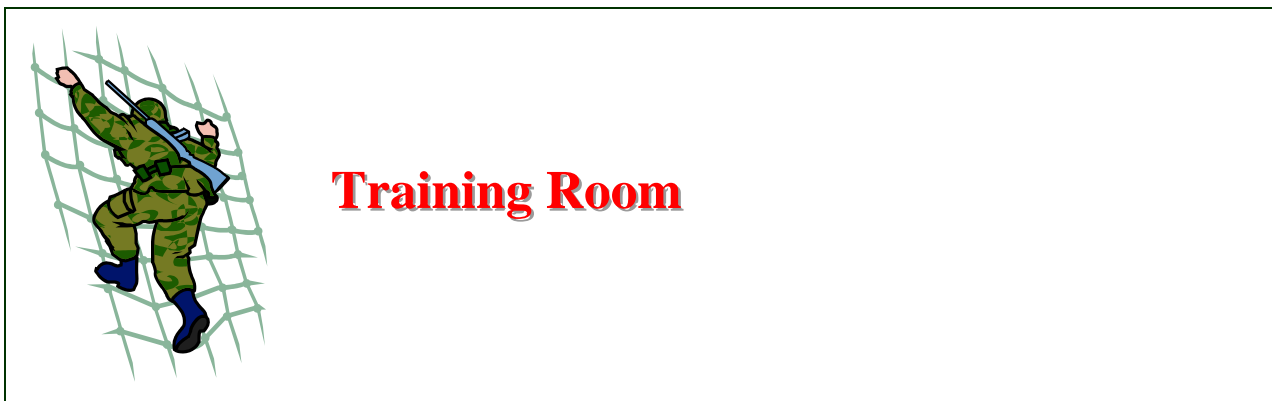
Over the past two years, the ERC has been reviewing and revising case investigation forms with the goal of standardized forms and a case investigation form for every reportable disease. On-line forms provide several advantages over previous practices:

- The ISDH no longer has to print, store, and distribute large quantities of paper forms.
- Local health departments do not have to maintain a supply of forms.
- Electronic forms are easier to revise and reissue as diseases and investigation focuses change.

The ERC plans to have all reportable disease case investigation forms available on-line by the end of 2005.

To access the electronic forms, visit the ISDH Web site at http://www.in.gov/isdh/form/index_hcp_forms.htm. The user can complete the forms two ways: either print a paper copy and enter data manually, or enter information on-line and print the completed form. Forms can be saved to a local computer and used in either way. Forms cannot be completed electronically before saving as a computer file. Completed forms must be printed to save the data.

The ISDH will continue to print the Animal Bite Report forms in the three-part format, because so many different agencies use the form, often in situations where computer access is unavailable. ***In general, as case investigation forms become available on-line, the ISDH will no longer mail paper copies of the forms.*** Completed case investigation forms can continue to be mailed or faxed to the ISDH ERC at 317-234-2812.



Indiana State Department of Health Immunization Program Presents: “Child and Adolescent Immunizations from A to Z”

The ISDH Immunization Program and Health Educators are offering this free, one-day educational course on all aspects of immunization practices. Topics include:

- Principles of Vaccination
 - Overview of the immune system
 - Classification of vaccines
- An Overview of Vaccine-Preventable Diseases
- General Recommendations on Immunization
 - Timing and spacing
 - Contraindications and precautions to vaccination
- Safe and Effective Vaccine Administration
 - Prior to administration
 - Administration
 - Documentation and reminder/recall
 - Adverse Events
- Safe Vaccine Storage and Handling
- Indiana Requirements
 - Schools
 - Daycare/Head Start
 - Exemptions
- Tools to Read Immunization Records
- Vaccine Misconceptions
 - MMR and autism
 - Thimerosal and mercury
 - Overloading the immune system
 - Influenza vaccine
- Reliable Resources

This course is designed for all immunization providers and staff. Presentation of this course takes six hours or can be customized to provide the components needed for your office or clinic staff. A training manual and certificate of attendance are provided to all attendees.

Courses are held throughout Indiana about four times per month. The schedule can be seen at www.in.gov/isdh/programs/immunization/ImmunizationTraining/Calendar.htm.

All persons involved in immunizations are encouraged to attend a course in their area. **Registration is required.** To attend or schedule/host a course in your area, or for more information on “Child and Adolescent Immunizations from A to Z” and other immunization education opportunities, please contact Beverly Sheets by calling (317) 501-5722 or e-mail hepbbev@aol.com.

Mark your calendars NOW!

Indiana Immunization Fall Awards Conferences:

When: **Sunday, Oct. 2, 2005**, "Reception with Speakers"

Monday, Oct. 3, 2005, "Conference"

Time: 8:30 a.m. to 3:30 p.m.

Where: Indianapolis Hilton, downtown.

Speakers: William Atkinson, MD, MPH
Information, Education and Partnership Branch
National Immunization Program
Centers for Disease Control and Prevention

Patricia Stinchfield, RN, CNP
The Children's Immunization Project
St. Paul, Minnesota
(Newest member of the ACIP)

Check out the new ISDH Immunization Program Web site at

<http://www.in.gov/isdh/programs/immunization/index.htm>.

"Getting It Right: Regulations, Compliance and Response" **17th Annual Indiana Hazardous Materials** **and Environmental Safety Conference**

Tuesday and Wednesday, June 7 and 8, 2005

Daily 8 a.m. to 4:30 p.m.

Valle Vista Conference Center, Greenwood, Indiana

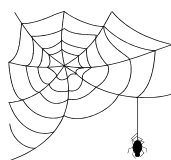
Registration fee includes admission to:

- 20 Sessions
- Workshops: OSHA 8-Hour HAZMAT/HAZWOPER Update, CAMEO and more
- Luncheons and refreshments at breaks
- Exhibit Area
- Plus, earn Continuing Education Credits

Who will benefit?

- LEPC and EMA representatives
- Environmental, health, emergency and safety staff from government agencies, industry and hospitals
- First response personnel from fire, emergency medical and law enforcement agencies
- Hazmat response teams
- Regulatory compliance specialists
- Attorneys
- Maritime industry personnel
- Transportation and distribution industry personnel
- Power and utility industry staff
- Safety and environmental personnel and students from colleges and universities

For conference information and exhibit area reservation, visit the conference Web site at <http://www.ifesconf.org> or call (317) 290-7003, 7 a.m.-4:30 p.m., EST, Monday-Friday. Conference is sponsored by Indiana Forum for Environmental Safety.



Wonderful Wide Web Sites

ISDH Data Reports Available

The ISDH Epidemiology Resource Center has the following data reports and the Indiana Epidemiology Newsletter available on the ISDH Web Page:

http://www.in.gov/isdh/dataandstats/data_and_statistics.htm

Indiana Cancer Incidence Report
(1990, 95, 96, 97, 98, 99)

Indiana Mortality Report
(1999, 2000, 2001, 2002)

Indiana Cancer Mortality Report
(1990-94, 1992-96, 1999)

Indiana Natality Report
(1998, 99, 2000, 2001, 2002)

Indiana Health Behavior Risk Factors
(1999, 2000, 2001, 2002)

Indiana Induced Termination of Pregnancy Report
(1998, 99, 2000, 2001, 2002)

Indiana Health Behavior Risk Factors (BRFSS)
Newsletter (9/2003, 10/2003, 6/2004, 9/2004)

Indiana Marriage Report
(1995, 97, 98, 99, 2000)

Indiana Hospital Consumer Guide
(1996)

Indiana Infectious Disease Report
(1997, 98, 99, 2000, 2001)

Public, Hospital Discharge Data
(1999, 2000, 2001, 2002)

Indiana Maternal & Child Health Outcomes &
Performance Measures
(1990-99, 1991-2000, 1992-2001)

HIV Disease Summary

Information as of March 31, 2005 (based on 2000 population of 6,080,485)

HIV - without AIDS to date:

334	New HIV cases from April 2004 thru March 2005	12-month incidence	5.49 cases/100,000
3,647	Total HIV-positive, alive and without AIDS on March 31, 2005	Point prevalence	59.98 cases/100,000

AIDS cases to date:

359	New AIDS cases from April 2004 thru March 2005	12-month incidence	5.90 cases/100,000
3,708	Total AIDS cases, alive on March 31, 2005	Point prevalence	60.99 cases/100,000
7,355	Total AIDS cases, cumulative (alive and dead)		

REPORTED CASES

 of selected notifiable diseases

Disease	Cases Reported in March MMWR Weeks 9-12		Cumulative Cases Reported January -March MMWR Weeks 1-12	
	2004	2005	2004	2005
Campylobacteriosis	44	8	76	21
Chlamydia	1,465	1,472	4,324	4,707
<i>E. coli</i> O157:H7	4	3	9	4
Hepatitis A	4	2	9	5
Hepatitis B	1	4	3	5
Invasive Drug Resistant <i>S. pneumoniae</i> (DRSP)	13	35	37	51
Invasive pneumococcal (less than 5 years of age)	5	7	10	12
Gonorrhea	503	544	1,544	1,825
Legionellosis	4	0	7	1
Lyme Disease	0	1	0	2
Measles	0	0	0	0
Meningococcal, invasive	2	2	6	4
Pertussis	8	42	9	72
Rocky Mountain Spotted Fever	0	0	0	0
Salmonellosis	44	13	80	26
Shigellosis	36	5	42	13
Syphilis (Primary and Secondary)	1	3	9	11
Tuberculosis	10	11	36	27
Animal Rabies	1 (bat)	0	1 (bat)	1 (bat)

For information on reporting of communicable diseases in Indiana, call the ISDH Epidemiology Resource Center at 317-233-7125.

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Newsletter

The *Indiana Epidemiology Newsletter* is published by the Indiana State Department of Health to provide epidemiologic information to Indiana health professionals and to the public health community.

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